



# ACH Application

## Business Information

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**Date** **Agent** **Referral to AMG?**

First Last

**Business Name \*** **DBA**

**Company Type \***

**Address \***

Street Address

Address Line 2

City State / Province / Region

ZIP / Postal Code Country

**Business Phone \*** **Cell Phone \*** **Email \***

**Website** **Date Business Started \*** **Federal Tax ID \***

Describe specific product or services the company offers for which the ACH services will be used: \*

### Types of Authorizations

TEL

WEB

PPD

CCD

IAT

What percentage of payments are from BUSINESSES:

What percentage of payments are from PERSONAL:

Will you need verification services for your transactions? \*

Yes

No

Learn more about our verification services here - <https://gjact.com>

Maximum Single Transaction Amount

Maximum Daily Dollar Amount

Maximum Daily Number of Transactions

## Owner / Principal Information

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Name \*

Ownership Percentage

First

Last

Address \*

Street Address

Address Line 2

City

State / Province / Region

ZIP / Postal Code

Country

**Date of Birth \***

**SS # (Used for background check only)**  
**- Put 123456789 if you do not have**  
**one \***

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**Name (Principal 2 - If Needed)**

**Ownership Percentage - 2**

First

Last

**Address (Principal 2 - If Needed)**

Street Address

Address Line 2

City

State / Province / Region

ZIP / Postal Code

Country

**Date of Birth (Principal 2 - If Needed)**

**SS # (Used for background check only)**

## Trade & Bank References

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Company Name

Contact Person

Phone

Company Name

Contact Person

Phone

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Bank Name

Contact Person

Phone

Bank Name

Contact Person

Phone

## Relevant Questions

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Have you received complaints from the Better Business Bureau, Attorney General, or similar organization? \*

Yes

No

If yes, please attach a full explanation, including copies of complaints, dates, and disposition of all complaints if possible

Have you accepted ACH payments before? \*

Name of processor if YES

Yes

No

## Required Documentation

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Bank statements (3 months ...

Processing statements (3 m...

Voided check or bank letter

Copy of drivers license or p...

Articles of Incorporation

Relevant marketing informa...

Complaint or Legal docume...

Last 2 years business taxes

Copy of Authorization Form,...

Screen prints of post-check...

Please confirm this information is correct

### Consent

I confirm this information is correct

Signature \*

Name

Title

First

Last

